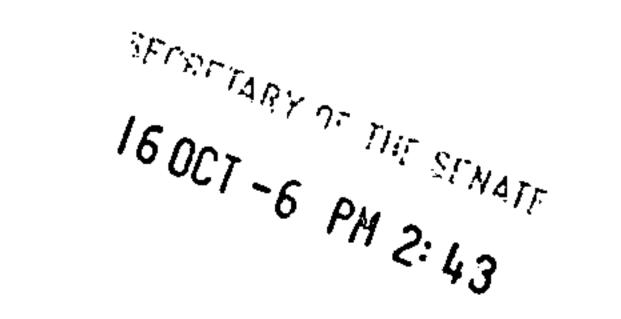
COVER SHEET FOR AMENDMENT OF POST-TRAVEL SUBMISSION



Instructions: Use this form as a cover sheet for any paperwork you may need to submit to the Office of Public Records in order to make your Privately Sponsored Post-Travel Submission complete in accordance with Rule 35. Only complete this form if you need to submit an amendment to a post-travel filing you have already submitted.

SUBMIT DIRECTLY TO THE OFFICE OF PUBLIC RECORDS IN 232 HART BUILDING

Name of Traveler: Andrew Polesovs	ሳ
Employing Office/Committee: HSGAC	
Travel Expenses Paid by (List all sources): PSF	· · · · · · · · · · · · · · · · · · ·
Travel Date(s): JUN 30-31, 2016	
Description/l'itle of Attached Forms: RE-1 Fo	orm (final version)
Purpose of Amendment (describe the reason for am	ending original submission): The RE-1 Form
	not the final version of the document.
	
15/6/16.	Sell 1
(Date)	(Silenature of Traveler)

Date/Time Stamp:

Form RE-1

EMPLOYEE PRE-TRAVEL AUTHORIZATION

Amended Form.

Pre-Travel Filing Instructions: Complete and submit this form at least 30 days prior to the travel departure date to the Select Committee on Ethics in SH-220. Incomplete and late travel submissions will not be considered or approved. This form must be typed and is available as a fillable PDF on the Committee's website at ethics.senate.gov. Retain a copy of your entire pre-travel submission for your required post-travel disclosure.

Name of Traveler:

Employing Office/Committee:	HSGAC-PSI
Private Sponsor(s) (list all): Partnership fo	
Travel date(s): July 30-31, 2016 Note: If you plan to extend the trip for	r any reason you must notify the Committee.
Destination(s): Airlie Conference Center	, Warrenton, VA
Explain how this trip is specifically connected	d to the traveler's official or representational duties:
The foreign affairs and national section the Homeland Security and Govern Investigations.	urity lectures on this trip will help inform my work as counsel for ment Affairs Committee's Permanent Subcommittee on
Name of accompanying family member (if ar	ny):_N/a
Relationship to Employee: Spouse	Child
I certify that the information contained in this	s form is true, complete and correct to the best of my knowledge:
7 ([6 (Dute)	(Signature of Employee)
TO BE COMPLETED BY SUPERVISING SEN. Secretary for the Majority, Secretary for the Mino	ATOR/OFFICER (President of the Senate, Secretary of the Senate, Sergeant at Arms, ority, and Chaplain):
Senator Rob Portman	hereby authorize Andrew Polesovsky
(Print Senator's/Officer's Nume)	(Print Traveler's Name)
related expenses for travel to the event descr	accept payment or reimbursement for necessary transportation, lodging, and ibed above. I have determined that this travel is in connection with his or her er, and will not create the appearance that he or she is using public office for
I have also determined that the attendance of	the employee's spouse or child is appropriate to assist in the representation
of the Senate. (signify "yes" by checking box)	
71,116	
(Revised 10/19/15)	(Signature of Supervising Senator/Officer) Form RE-

Andrew Polesovsky